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CONFIRMATION NO. 4966

SERIAL NUMBER 10/762,152	FILING OR 371(c) DATE 01/21/2004 RULE	CLASS 034	GROUP ART UNIT 3749	ATTORNEY DOCKET NO. 9496
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**APPLICANTS**

Dean Larry DuVal, Lebanon, OH;  
 Michael Joseph Orr, West Chester, OH;  
 Rafael Trujillo, Mason, OH;  
 Angela Renee Troester, Mason, OH;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 10/697,735 10/29/2003 which is a CIP of 10/418,595 04/17/2003 PAT 7,059,065  
 This application 10/762,152  
 is a CIP of 10/697,685 10/29/2003 PAT 7,043,855  
 which is a CIP of 10/418,595 04/17/2003 PAT 7,059,065  
 This application 10/762,152  
 is a CIP of 10/697,734 10/29/2003  
 which is a CIP of 10/418,595 04/17/2003 PAT 7,059,065  
 This application 10/762,152  
 is a CIP of 10/697,736 10/29/2003  
 which is a CIP of 10/418,595 04/17/2003 PAT 7,059,065  
 which claims benefit of 60/374,601 04/22/2002  
 and claims benefit of 60/426,438 11/14/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 04/24/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	OH	14	37	3
Verified and Acknowledged	Examiner's Signature <i>Stephen J. Ham</i> Initials				

**ADDRESS**

27752

**TITLE**

Volatile material delivery method

FILING FEE RECEIVED 1206	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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